

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Ending Spending Action Fund		FEC IDENTIFICATION NUMBER ▼ C C00489856	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee CD, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 29 / 2014	
Mailing Address P. O. Box 1877		Amount 30000.00	
City Alexandria	State VA	Zip Code 22313	Transaction ID : SE.5610
Purpose of Expenditure online advertising		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2014
Name of Federal Candidate Jeanne Shaheen		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		561716.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Crossroads Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 28 / 2014	
Mailing Address 66 Canal Center Plaza Suite 555		Amount 16525.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5609
Purpose of Expenditure media placement		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2014
Name of Federal Candidate Jeanne Shaheen		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		578241.11	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	46525.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	46525.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins

[Electronically Filed]

Date

 MM / DD / YYYY
 08 / 29 / 2014

Signature